## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

| Encentre Colober 1, 2001   |                |   |                                    |                               |              |                  |                 |                  | XACT                   | 10      | 09                  |                        |
|--|----------------|---|------------------------------------|-------------------------------|--------------|------------------|-----------------|------------------|------------------------|---------|---------------------|------------------------|
| CLAIMS A   |                |   | (Column 1)                         |                               | (Column 2)   |                  | SM<br>TY        | ALL E            | NTITY                  | OR      | OTHER<br>SMALL      |                        |
| TOTAL CLAIMS   |                |   | 22                                 |                               |              |                  | ſ               | RATE             | FEE                    |         | RATE                | FEE                    |
| FOR  |                |   | NUMBER FILED                       |                               | NUMBER EXTRA |                  | ВА              | SIC FEE          | 370.00                 | OR      | BASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS  |                |   | ) 2 minus 20=                      |                               | * 2          |                  | >               | <b>(\$ 9=</b>    | 18.00                  | OR      | ·X\$18=             |                        |
| INDEPENDENT CLAIMS   |                |   | 4 mi                               | nus 3 =                       | *            |                  | ;               | <b>(42</b> =     | 42.00                  | 1       | X84=                |                        |
| MU   | LTIPLE DEPEN   | DENT CLAIM PI                             | RESENT                             |                               |              |                  |                 | 140=             | 100                    | OR      | +280=               |                        |
| * If   | the difference | in column 1 is                            | less than zero, enter "0" in colum |                               |              | column 2         |                 | OTAL             | 430                    | OR      | TOTAL               | ہ فی سے سے<br>ا        |
|  | C              | LAIMS AS A                                | MENDED                             | ENDED - PART II               |              |                  |                 |                  | <u> </u>               | J       | OTHER               | THAN                   |
|  |                | (Column 1)                                | (Column 2) (Column 3               |                               |              | s                | MALL            | ENTITY           | OR                     | SMALL E |                     |                        |
| AMENDMENT A  |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA | F               | ATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>JIONAL<br>FEE |
|  | Total          | . 19                                      | Minus                              | ** 6                          | 20           | ₹                | ×               | \$ 9=            |                        | OR      | X\$18=              |                        |
|  | Independent    | · '4                                      | Minus                              | ***                           | 4            | =                | >               | (42=             |                        | OR      | X84=                |                        |
|  | FIRST PRESE    | ILTIPLE DEPENDENT CLAIM                   |                                    |                               |              | +                | 140=            |                  | OR                     | +280=   |                     |                        |
|  |                |   |                                    | ×                             |              |                  | ADD             | TOTAL<br>IT. FEE |                        | OR      | TOTAL<br>ADDIT. FEE |                        |
|  |                | (Column 1)                                | -                                  | (Colur                        |              | (Column 3)       |                 |                  | •                      |         |                     |                        |
| AMENDMENT B  |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA | F               | ATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total          | *   | Minus                              | **                            | ·            | =                | ×               | \$ 9=            |                        | OR      | X\$18=              |                        |
|  | Independent    | *   | Minus                              | ***                           | F OL AINA    | <u> -</u>        |                 | (42=             |                        | OR      | X84=                |                        |
| <u> </u>   | FIRST PRESE    | NTATION OF M                              | JETIPLE DEP                        | ENDEN                         | CLAIM        |                  | <b>1</b>   +    | 140=             |                        | OR      | +280=               |                        |
| -  |                |   |                                    |                               |              |                  |                 | TOTAL<br>IT. FEE |                        | OR      | TOTAL<br>ADDIT: FEE |                        |
| (Column 1) (Column 2) (Column 3)   |                |   |                                    |                               |              |                  |                 |                  |                        |         |                     |                        |
| AMENDMENT C  |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                    | PREVI                         | BER          | PRESENT<br>EXTRA | F               | ATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total          | *   | Minus                              | **                            |              | <u> </u>         | ×               | \$ 9=            | ****                   | OR      | X\$18=              |                        |
|  | Independent    | *   | Minus                              | ***                           |              | =                |                 | (42=             |                        |         | X84=                |                        |
|  | FIRST PRESE    | NTATION OF M                              | ULTIPLE DEF                        | PENDEN                        | T CLAIM      |                  | J ├ <del></del> |                  |                        | OR      |                     |                        |
| +140= +140=  |                |   |                                    |                               |              |                  |                 |                  |                        | OR      | +280=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                |   |                                    |                               |              |                  |                 |                  |                        |         |                     |                        |